

Change of Membership Details

Please complete and return form to: Christian Super, Locked Bag 5073, Parramatta NSW 2124
Internet: www.christiansuper.com.au

Please write in BLOCK letters and use a BLUE or BLACK pen. This request will be invalid if unsigned and undated.

You can change your contact details and advise your TFN online.
To register for MemberAccess, go to www.aas.com.au

CURRENT MEMBER DETAILS (Please complete in full)

Member Number	
<input type="text"/>	
<small>(This can be found on your Member Statement)</small>	
Mr/Mrs/Ms/Miss/Other	Surname
<input type="text"/>	<input type="text"/>
Given Names	
<input type="text"/>	
Date of Birth (ddmmyyyy)	
<input type="text"/>	

Only complete the sections you wish to change

CHANGES TO MY NAME AND/OR SIGNATURE

If changing your name you must attach a certified copy of one of the following documents:

- Certificate of Birth
- Certificate of Marriage
- Certificate of Naturalisation/Citizenship
- Deed Poll
- Certificate of Divorce, Decree Nisi, Decree Absolute
- If none of these documents are available, a Statutory Declaration

Mr/Mrs/Ms/Miss/Other	Surname
<input type="text"/>	<input type="text"/>
Given Names	
<input type="text"/>	
Original Signature	New Signature (if different)
<input type="text"/>	<input type="text"/>

CHANGES TO MY CONTACT DETAILS

New address			
Residential Address			
Street Number	Street Name		
<input type="text"/>	<input type="text"/>		
Suburb/Town	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Postal Address (if different from residential address)			
Street Number / PO Box	Street Name		
<input type="text"/>	<input type="text"/>		
Suburb/Town	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Telephone (daytime)	Mobile		
<input type="text"/>	<input type="text"/>		
New email address			
Email			
<input type="text"/>			

Please turnover to complete and sign this form ➤

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CHANGES TO PREFERRED BENEFICIARY NOMINATIONS (If you have more than 3, please photocopy this form)

I wish to nominate the following person(s) and/or Legal Personal Representative, to receive my superannuation and related benefit(s) (if any) in the event of my death.

Mr/Mrs/Ms/Miss/Other	Surname	Given Name	Relationship to you	Portion of Benefit (%)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Total must add up to 100%)

(Whole numbers only)

Important Note

Your preferred beneficiary nominations do not bind Christian Super in any way. This means, although your nomination will be taken into consideration, Christian Super has absolute discretion in determining how to distribute your death benefit and to whom.

If you would like to make your beneficiary nominations binding on Christian Super, you will need to complete a *Binding Death Benefit Notice to Trustee*. This can be obtained at www.christiansuper.com.au

NOTIFICATION OF TAX FILE NUMBER (TFN) DETAILS

Under the *Superannuation Industry (Supervision) Act 1993*, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change.

Christian Super may disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request in writing to Christian Super that your TFN not be disclosed to any other superannuation provider.

It is not an offence not to quote your TFN. However, giving your TFN to Christian Super will have the following advantages (which may not otherwise apply):

- Christian Super will be able to accept all types of contributions to your account/s;
- the tax on contributions to your superannuation account/s will not increase;
- other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits; and
- it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

My TFN is:

CHECKLIST

- Have you changed your details with your employer?
- Have you signed and dated this form?
- Have you attached certified photocopies of documents necessary to change your details? (If applicable)

DECLARATION

Privacy

When your personal details are provided to Christian Super they are securely stored and are accessible only to authorised personnel for the purposes of maintaining your account, including your death and disablement insurance arrangements. If you wish to view our privacy statement please go to www.christiansuper.com.au.

I declare that

- The information I have provided and any associated documentation in support of the changes advised in this form are, to the best of my knowledge, true and accurate
- I understand Christian Super will rely on this information in good faith and my record kept by Christian Super will reflect the information in this form
- I will immediately notify Christian Super if any of my personal details change in the future
- I understand and accept the information contained in this form may be shared with representatives, advisers and service providers of Christian Super and my employer(s), and
- The information provided in this form could potentially alter my entitlement eligibility and insurance arrangements (if applicable).

My Signature

Dated (ddmmyyy)